To: Fr:				
rr.	Massachusetts Commission Against Discrimination			
	,			
Re:	Μ		O No: C No:	
Dear (Con	nmis	sioner:	
for the	I hereby request permission to withdraw my complaint filed with this Commission he following reason:			
	()	I wish to file a private right of action in civil court.	
	()	I have reached a satisfactory settlement with the Respondent.	
	()	I no longer intend to pursue this matter at the Commission.	
If applicable, I also wish to withdraw this complaint from the Equal Employment Opportunity Commission.				
	date	e, or	been advised that it is unlawful for any person or persons to threaten, harass me because I filed a complaint. I have not been coerced into s withdrawal.	
Data			Complement's signature or	
Date			Complainant's signature or Signature of attorney	

Please fill out this form and return it to your Attorney Investigator via fax (617) 994-6024. Failure to submit this information may result in the case remaining open at the MCAD and/or EEOC.